

STATE OF NEVADA  
STATE GAMING CONTROL BOARD / NEVADA GAMING COMMISSION

**REGISTRATION OF RACE BOOK AND SPORTS POOL EMPLOYEES**

NGC Regulation 22.035 requires any individual who fulfills the function of race book or sports pool manager, race book or sports pool supervisor, or who determines race book or sports pool betting odds, point spreads or betting lines to register with the Board, and provide the following information:

This registration is for my employment at \_\_\_\_\_ for the position of \_\_\_\_\_  
\_\_\_\_\_. I was placed in this position on \_\_\_\_\_.  
Mo./Day/Yr.

**1. Personal Information**

Last Name	First Name	Middle Name
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Alias(es), Nicknames, Maiden Name, Other Name Changes, Legal or Otherwise)

Date of Birth	Place of Birth (City, County, State)
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Driver's License Number and Issuing State	Social Security Number	Sex
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**2. Arrests and Detentions**

Have you ever been arrested, detained, charged, convicted, pleaded guilty or nolo contendere, indicted, or summoned to answer for any criminal offense, either felony or misdemeanor, or violation for any reason whatsoever, including any record expunged or sealed by a court order, regardless of the disposition of the event? (Except minor traffic citations.)      Yes      No  
If yes, give details in space provided below. List all cases without exception and furnish details on separate page if necessary.

Date of Arrest	Charge	Location - City and State	Disposition	Arresting Agency

**3. Litigation**

Have you as an individual ever been a party to a lawsuit as either a plaintiff or defendant or an arbitration as either a claimant or respondent?      Yes      No  
If yes, give details below. List all cases without exception, including bankruptcies.

Plaintiff/Defendant or Claimant/Respondent	Date Filed	Court and Case Number	City, County, and State	Disposition/Date

**4. Residences**

Please list all residences you have had for the last 5 years. Attach a separate sheet if necessary.

Month and Year (From - To)	Street and Number	City	State County Zip Code

## 5. Employment

Beginning with your current employment, please provide a complete list of your work history you have had for the last 10 years. Attach a separate sheet if necessary.

Month and Year (From - To)	Name/Mailing Address of Employer/Business	Position Held	Duties

I do hereby certify that the statements contained herein are true and correct and contain a full and true account of the information requested. I consent to a full licensing investigation by the State Gaming Control Board ("Board") and Nevada Gaming Commission ("NGC"), subject to the provisions of NGC Regulation 22.035(3). I further consent to provide any additional information as may be required by the Chairman of the Board.

State of Nevada

County of \_\_\_\_\_

\_\_\_\_\_  
Signature

Signed and sworn before me on \_\_\_\_\_

(Date)

by \_\_\_\_\_

(Name of person making statement)

(Notary stamp)

\_\_\_\_\_  
(Signature of notarial officer)